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U.S.PTO

PTO/SB/05 (01-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. P05024

First Inventor Cheng-Jen LIN

Title METHOD OF EXTRACTING ISOF

Express Mail Label No.

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original and a duplicate for fee processing)*
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 10]  
*(preferred arrangement set forth below)*
  - Descriptive title of the Invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 2]
5. Oath or Declaration [Total Sheets 1]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with Box 18 completed)*
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6.  Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:  
Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
*(if applicable, all necessary)*
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  Paper
  - c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement  Power of Attorney  
*(when there is an assignee)*
11.  English Translation Document *(if applicable)*
12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*
15.  Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*
16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation       Divisional       Continuation-in-part (CIP)      of prior application No.: .....

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_  
 For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**
 Customer Number: 000040401      OR       Correspondence address below

|         |                                 |                |              |
|---------|---------------------------------|----------------|--------------|
| Name    | HERSHKOVITZ & ASSOCIATES        |                |              |
| Address | 1725 I STREET N.W.<br>SUITE 300 |                |              |
| City    | WASHINGTON                      | State          | DC           |
| Country | Telephone                       | Zip Code 20006 |              |
|         | 703-323-9330                    | Fax            | 703-323-6617 |

|                   |                     |                                   |              |
|-------------------|---------------------|-----------------------------------|--------------|
| Name (Print/Type) | ABRAHAM HERSHKOVITZ | Registration No. (Attorney/Agent) | 45,294       |
| Signature         |                     | Date                              | FEB. 9, 2004 |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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U.S. PTO

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

|                         |      |     |
|-------------------------|------|-----|
| TOTAL AMOUNT OF PAYMENT | (\$) | 385 |
|-------------------------|------|-----|

## Complete if Known

|                      |               |
|----------------------|---------------|
| Application Number   |               |
| Filing Date          |               |
| First Named Inventor | Cheng Jen LIN |
| Examiner Name        |               |
| Art Unit             |               |
| Attorney Docket No.  | P05024        |

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None  
 Deposit Account:

Deposit Account Number  
50-2929  
Deposit Account Name  
HERSHKOVITZ & ASSOCIATES

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION (continued)

### 1. BASIC FILING FEE

| Large Entity             | Small Entity  | Fee Description        | Fee Paid   |
|--------------------------|---------------|------------------------|------------|
| Fee Code (\$)            | Fee Code (\$) |                        |            |
| 1001 770                 | 2001 385      | Utility filing fee     | 385        |
| 1002 340                 | 2002 170      | Design filing fee      |            |
| 1003 530                 | 2003 2 5      | Plant filing fee       |            |
| 1004 770                 | 2004 38       | Reissue filing fee     |            |
| 1005 160                 | 2005 80       | Provisional filing fee |            |
| <b>SUBTOTAL (1) (\$)</b> |               |                        | <b>385</b> |

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims       | Fee from<br>Extra Claims<br>below |         |   | Fee Paid |
|--------------------|-----------------------------------|---------|---|----------|
|                    | -20** =                           |         | X |          |
|                    | Independent<br>Claims             | - 3** = | X |          |
| Multiple Dependent |                                   |         | = |          |

| Large Entity             | Small Entity  | Fee Description  |
|--------------------------|---------------|--|
| Fee Code (\$)            | Fee Code (\$) |  |
| 1202 18                  | 2202 9        | Claims in excess of 20                                     |
| 1201 86                  | 2201 43       | Independent claims in excess of 3                          |
| 1203 290                 | 2203 145      | Multiple dependent claim, if not paid                      |
| 1204 86                  | 2204 43       | ** Reissue independent claims over original patent         |
| 1205 18                  | 2205 9        | ** Reissue claims in excess of 20 and over original patent |
| <b>SUBTOTAL (2) (\$)</b> |               |  |

\*\*or number previously paid, if greater; For Reissues, see above

### 3. ADDITIONAL FEES

Large Entity Small Entity

| Fee Code (\$) | Fee (\$) | Fee Code (\$) | Fee (\$) | Fee Description  | Fee Paid |
|---------------|----------|---------------|----------|--|----------|
| 1051          | 130      | 2051          | 65       | Surcharge - late filing fee or oath  |          |
| 1052          | 50       | 2052          | 25       | Surcharge - late provisional filing fee or cover sheet                     |          |
| 1053          | 130      | 1053          | 130      | Non-English specification  |          |
| 1812          | 2,520    | 1812          | 2,520    | For filing a request for ex parte reexamination                            |          |
| 1804          | 920*     | 1804          | 920*     | Requesting publication of SIR prior to Examiner action                     |          |
| 1805          | 1,840*   | 1805          | 1,840*   | Requesting publication of SIR after Examiner action                        |          |
| 1251          | 110      | 2251          | 55       | Extension for reply within first month                                     |          |
| 1252          | 420      | 2252          | 2 0      | Extension for reply within second month                                    |          |
| 1253          | 9 0      | 2253          | 4        | Extension for reply within third month                                     |          |
| 1254          | 1,4 0    | 2254          | 7        | Extension for reply within fourth month                                    |          |
| 1255          | . 0      | 2255          | 1,005    | Extension for reply within fifth month                                     |          |
| 1401          | 3 0      | 2401          | 16       | Notice of Appeal   |          |
| 1402          | 3 0      | 2402          | 16       | Filing a brief in support of an appeal                                     |          |
| 1403          | 2 0      | 2403          | 14       | Request for oral hearing   |          |
| 1451          | 1,510    | 1451          | 1,510    | Petition to institute a public use proceeding                              |          |
| 1452          | 110      | 2452          | 55       | Petition to revive - unavoidable   |          |
| 1453          | 1, 30    | 2453          | 6        | Petition to revive - unintentional   |          |
| 1501          | 1, 30    | 2501          | 6        | Utility issue fee (or reissue)   |          |
| 1502          | 4 0      | 2502          | 2        | Design issue fee   |          |
| 1503          | 6 0      | 2503          | 3        | Plant issue fee  |          |
| 1460          | 130      | 1460          | 130      | Petitions to the Commissioner  |          |
| 1807          | 50       | 1807          | 50       | Processing fee under 37 CFR 1.17(q)  |          |
| 1806          | 180      | 1806          | 180      | Submission of Information Disclosure Stmt                                  |          |
| 8021          | 40       | 8021          | 40       | Recording each patent assignment per property (times number of properties) |          |
| 1809          | 7 0      | 2809          | 3        | Filing a submission after final rejection (37 CFR 1.129(a))                |          |
| 1810          | 7 0      | 2810          | 3        | For each additional invention to be examined (37 CFR 1.129(b))             |          |
| 1801          | 7 0      | 2801          | 3        | Request for Continued Examination (RCE)                                    |          |
| 1802          | 900      | 1802          | 900      | Request for expedited examination of a design application                  |          |

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$)**

(Complete if applicable)

|                   |                            |                                      |              |           |              |
|-------------------|----------------------------|--------------------------------------|--------------|-----------|--------------|
| Name (Print/Type) | ABRAHAM HERSHKOVITZ        | Registration No.<br>(Attorney/Agent) | 45,294       | Telephone | 703-323-9330 |
| Signature         | <i>Abraham Hershkovitz</i> | Date                                 | Feb. 9, 2004 |           |              |

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